FORMAT and FILE SPECIFICATIONS for MIRCAI ONLINE TRANSMISSION INPATIENT DATA

April 2004



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Revisions

Version 3.0	6/23/05	Lorraine	Removed "PROPOSED" from title page. Regulations were approved on May 5, 2005.	
		Lorraine	Pages 10-11: For Principal and Other Diagnosis added "Do not code the decimal point" under Special Instructions.	
			Pages 12-13: For Principal and Other Procedure added "Do not code the decimal point" under Special Instructions. Page 14: For Principal and Other E-Code, added "Code the 'E' on the file, but do not code the decimal point" under Special Instructions.	

MINIMUM PC CONFIGUATION

- 1. Access to a personal computer (with the following minimum configuration)
 - 300MHz processor, 64 MB RAM, 4 GB hard drive (at least 500MB free)
 - High speed Internet connection (preferred) or 56k modem or faster
 - Microsoft Internet Explorer version 5.0 (or higher) with 128-bit Secure Socket Layer (SSL)
 - Adobe Acrobat Reader version 4.0 (or higher)
 - Virus Checking Software
 - File Compression Program MIRCal accepts files that are 3MB or less.
 Data files over 3MB must be compressed in order to be accepted by MIRCal.
 - Optional CD-ROM
- 2. Internet access (ISP)
- 3. E-mail

STANDARD RECORD FORMAT

Deviation from the format will not be accepted

- One reporting facility and time period per file
- Standard ASCII character coding
- Record length 520 characters followed by a carriage return and line feed

ADDITIONAL REQUIREMENTS

- No packed or binary data
- No Null Values
- The data file must be a text file with the extension of ".txt" (if zipped, submit the zipped file with a ".zip" extension)

FILE COMPRESSION

Data files may be compressed (zipped) to speed up the file uploading time. The following compression applications are supported and can be obtained from the manufacturer's website:

- gzip
- Pkzip
- Winzip

Standard Record Format

Data Element	<u>From</u>	<u>Through</u>	Format ¹
Patient's Type of Care	1	1	N(1)
Facility Identification Number	2	7	N(6)
Date of Birth	8	15	N(8)
Sex	16	16	N(1)
Race			
Ethnicity	17	17	N(1)
Race	18	18	N(1)
ZIP Code	19	23	X(5)
Admission Date	24	31	N(8)
Source of Admission			
Site	32	32	N(1)
Licensure of Site	33	33	N(1)
Route of Admission	34	34	N(1)
Type of Admission	35	35	N(1)
Discharge Date	36	43	N(8)
Principal Diagnosis	44	48	X(5)
Principal Diagnosis Present at Admission	49	49	A(1)
Other Diagnoses	50		$X(5)^{2}$
Other Diagnoses Present at Admission		193	$A(1)^2$
Principal Procedure Code	194	197	X(4)
Principal Procedure Date	198	205	X(8)
Other Procedure Codes	206		$X(4)^{3}$
Other Procedures Dates		445	$(8)^3$
Principal E-Code	446	450	X(5)
Other E-Codes	451	470	$X(5)^4$
Patient's Social Security Number	471	479	N(9)
Disposition of Patient	480	481	N(2)
Total Charges	482	488	N(7)
Abstract Record Number	489	500	X(12)
DNR Order	501	501	A(1)
Unused	502	502	X(1)
Expected Source of Payment			.
Payer Category	503	504	N(2)
Type of Coverage	505	505	N(1)
Plan Code Number	506	509	N(4)
Unused	510	520	X(11)

Footnotes are on Page 5

FOOTNOTES

¹Format indicates data type and length (in parentheses). Data type is defined as:

A = Alpha

N = Numeric

X = Alphanumeric

²This variable and its format occurs 24 times. Fill from the left-most position and **DO NOT** skip fields. Each other diagnosis and its condition present at admission is paired. The first pair is in positions 50-55, the second pair in 56-61, the third pair in 62-67, and so on consecutively through 24 pairs.

³This variable and its format occurs 20 times. Fill from the left-most position and DO NOT skip fields. Each other procedure and its date is paired. The first pair is in positions 206-217, the second pair in 218-229, the third pair in 230-241, and so on consecutively though 20 pairs.

⁴This variable and its format occurs 4 times. Fill from the left-most position and **DO NOT** skip fields.

PATIENT'S TYPE OF CARE

Record Position: 1
Data Length: 1

Data Type: Numeric

Codes: 1 = Acute Care

3 = Skilled Nursing/Intermediate Care

4 = Psychiatric Care

5 = Chem Dependency Recovery Care

6 = Physical Rehabilitation Care

FACILITY IDENTIFICATION NUMBER

Record Positions: 2 through 7

Data Length: 6

Data Type: Numeric

Codes: Facility Identification Number (the unique facility

number assigned by OSHPD). This field is

required for each record.

DATE OF BIRTH

Record Positions: 8 through 15

Data Length: 8

Data Type: Numeric

Codes: <u>99</u> <u>99</u> <u>9999</u>

Month Day Year

Special Instructions: Single-digit months and days must include a

preceding zero.

<u>SEX</u>

Record Position: 16
Data Length: 1

Data Type:

Codes:

Numeric

1 = Male

2 = Female

3 = Other 4 = Unknown

RACE

ETHNICITY

Record Position: 17
Data Length: 1

Data Type: Numeric
Codes: 1 = Hispanic

2 = Non-Hispanic 3 = Unknown

RACE

Record Position: 18
Data Length: 1

Data Type: Numeric
Codes: 1 = White
2 = Black

3 = Native American/Eskimo/Aleut

4 = Asian/Pacific Islander

5 = Other 6 = Unknown

ZIP CODE

Record Positions: 19 through 23

Data Length: 5

Data Type: Alphanumeric Codes: 5-digit ZIP Code

XXXXX = Unknown YYYYY = Foreign ZZZZZ = Homeless

ADMISSION DATE

Record Positions: 24 through 31

Data Length: 8

Data Type: Numeric

Codes: <u>99</u> <u>99</u> <u>9999</u>

Month Day Year

Special Instructions: Single-digit months and days must include a

preceding zero.

SOURCE OF ADMISSION

SITE

Record Position: 32
Data Length: 1

Data Type: Numeric Codes: 1 = Home

2 = Residential Care Facility3 = Ambulatory Surgery

4 = Skilled Nursing/Intermediate Care
5 = Acute (Inpatient) Hospital Care

6 = Other (Inpatient) Hospital Care

7 = Newborn 8 = Prison/Jail 9 = Other

LICENSURE OF SITE

Record Position: 33
Data Length: 1

Data Type: Numeric

Codes: 1 = This Hospital

2 = Another Hospital 3 = Not a Hospital

ROUTE OF ADMISSION

Record Position: 34
Data Length: 1

Data Type: Numeric

Codes: 1 = Your Emergency Room

2 = Not Your Emergency Room

TYPE OF ADMISSION

Record Position: 35
Data Length: 1

Data Type: Numeric

Codes: 1 = Scheduled

2 = Unscheduled

3 = Infant, under 24 hrs old

4 = Unknown

DISCHARGE DATE

Record Positions: 36 through 43

Data Length: 8

Data Type: Numeric

Codes: <u>99</u> <u>99</u> <u>9999</u>

Month Day Year

Special Instructions: Single-digit months and days must include a

preceding zero.

PRINCIPAL DIAGNOSIS

Record Positions: 44 through 48

Data Length: 5

Data Type: Alphanumeric

Codes: International Classification of Diseases, 9th Revision,

Clinical Modification

Special Instructions: The ICD-9-CM code must be left-justified and space-

filled. Do not code the decimal point (example: 80521). Do not include E-codes or M-codes.

The default value is all spaces.

PRINCIPAL DIAGNOSIS CONDITION PRESENT AT ADMISSION

Record Position: 49
Data Length: 1

Data Type: Alpha
Codes: Y = Yes
N = No

U = Uncertain

OTHER DIAGNOSES

Record Positions: 50 through 54, 56-60, 62-66, etc. consecutively

through 24 codes ending in position 192

Data Length: 5

Data Type: Alphanumeric

Codes: International Classification of Diseases, 9th Revision,

Clinical Modification

Special Instructions: The ICD-9CM code must be left-justified and space-

filled. Fill from the left-most position and **DO NOT** skip fields. Do not code the decimal point (example:

80521). Do not include E-codes or M-codes.

The default value is all spaces.

OTHER DIAGNOSES CONDITIONS PRESENT AT ADMISSION

Record Positions: 55, 61, 67, etc. consecutively through 24 codes

ending in position 193

Data Length: 1

Data Type: Alpha
Codes: Y = Yes
N = No

U = Uncertain

PRINCIPAL PROCEDURE AND DATE

PRINCIPAL PROCEDURE CODE

Record Positions: 194 through 197

Data Length: 4

Data Type: Alphanumeric

Codes: International Classification of Diseases, 9th Revision,

Clinical Modification

Special Instructions: The Principal Procedure Code must be left-justified

and space-filled. Do not code the decimal point

(example: 0523).

The default value is all spaces.

PRINCIPAL PROCEDURE DATE

Record Positions: 198 through 205

Data Length: 8

Data Type: Alphanumeric

Codes: <u>99</u> <u>99</u> <u>9999</u>

Month Day Year

Special Instructions: Single-digit months and days must include a

preceding zero. When there is no Principal Procedure, the default value is all spaces.

OTHER PROCEDURES AND DATES

OTHER PROCEDURE CODES

Record Positions: 206 through 209, 218-221, 230-233, etc.

consecutively through 20 codes ending in position

437

Data Length: 4

Data Type: Alphanumeric

Codes: International Classification of Diseases, 9th Revision,

Clinical Modification

Special Instructions: Other Procedure Codes must be left-justified and

space-filled. Fill from the left-most position and **DO NOT** skip fields. Do not code the decimal point

(example: 0523).

The default value is all spaces.

OTHER PROCEDURE DATES

Record Positions: 210 through 217, 222-229, 234-241, etc.

consecutively through 20 codes ending in position

445

Data Length: 8

Data Type: Alphanumeric

Codes: 99 99 9999

Month Day Year

Special Instructions: Single-digit months and days must include a

preceding zero. When there are no Other

Procedures Codes, the default value is all spaces.

PRINCIPAL E-CODE

Record Positions: 446 through 450

Data Length: 5

Data Type: Alphanumeric

Codes: International Classification of Diseases, 9th Revision,

Clinical Modification

Special Instructions The ICD-9-CM code must be left-justified and space-

filled. Code the 'E' on the file, but do not code the

decimal point (example: E8799). The default value is all spaces.

OTHER E-CODES

Record Positions: 451 through 455, 456-460, 461-465, and 466-470

(maximum of 4 E-Codes)

Data Length: 5

Data Type: Alphanumeric

Codes: International Classification of Diseases, 9th Revision,

Clinical Modification

Special Instructions: The ICD-9-CM code must be left-justified and space-

filled. Code the "E" on the file, but do not code the

decimal point (example E8490). The default value is all spaces.

PATIENT'S SOCIAL SECURITY NUMBER

Record Positions: 471 through 479

Data Length: 9

Data Type: Numeric

Codes: Enter the full 9-digit SSN including zeros. **DO**

NOT use hyphens. Enter 000000001 (Unknown) if the SSN is not recorded in the patient's medical

record.

DISPOSITION OF PATIENT

Record Positions: 480 through 481

Data Length: 2

Data Type: Numeric

Codes: 01 = Routine Discharge

02 = Acute Care within This Hospital

03 = Other Type of Hospital Care within this

Hospital (Psych, Chem Dep, Physical Rehab)

04 = Skilled Nursing/Intermediate Care within This

Hospital

05 = Acute Care at Another Hospital

06 = Other Type of Hospital Care at Another Hospital

(Not Skilled Nursing/Intermediate Care)

07 = Skilled Nursing/Intermediate Care Elsewhere

08 = Residential Care Facility

09 = Prison/Jail

10 = Against Medical Advice

11 = Died

12 = Home Health Service

13 = Other

Special Instructions: Single digit values must include a preceding zero.

TOTAL CHARGES

Record Positions: 482 through 488

Data Length: 7

Data Type: Numeric

Codes: Whole dollars only—no cents. Code 9999999 for

Total Charges exceeding 7 positions.

Special Instructions: Total Charges must be right-justified, zero-filled,

and unsigned.

The default value is all zeros.

ABSTRACT RECORD NUMBER (OPTIONAL)

Record Positions: 489 through 500

Data Length: 12

Data Type: Alphanumeric

Code: Optional medical record number or any patient

identification number assigned by the facility.

Special Instructions: The Abstract Record Number must be left-justified

and space-filled.

If not reported, the default value is all spaces.

DO NOT RESUSCITATE (DNR) ORDER

Record Position: 501
Data Length: 1

Data Type: Alpha Codes: Y = Yes

N = No

<u>UNUSED</u>

Record Position: 502
Data Length: 1

Data Type: Alphanumeric

Codes: Space

EXPECTED SOURCE OF PAYMENT

Payer Category

Record Positions: 503 through 504

Data Length: 2

Data Type: Numeric

Codes: 01 = Medicare

02 = Medi-Cal

03 = Private Coverage

04 = Workers' Compensation05 = County Indigent Programs

06 = Other Government07 = Other Indigent

08 = Self Pay

09 = Other Payer

Special Instructions: Single-digit codes must include a preceding zero.

EXPECTED SOURCE OF PAYMENT (CONTINUED)

Type of Coverage

Record Position: 505
Data Length: 1

Data Type: Numeric

Codes: 1 = Managed Care – Knox-Keene or Medi-Cal

County Organized Health System

2 = Managed Care – Other3 = Traditional Coverage

Special Instructions: Type of Coverage MUST be reported if Payer

Category equals 01, 02, 03, 04, 05, or 06. If Payer Category equals 07, 08, or 09, then the default

value is zero.

Plan Code Number

Record Positions: 506 through 509

Data Length: 4

Data Type: Numeric

Codes: Refer to California Code of Regulations, Section

97232, Definition of Data Element – Expected

Source of Payment-Plan Codes

Special Instructions: The Plan Code Number must be right-justified and

zero-filled. The Plan Code Number MUST be reported if Type of Coverage equals 1. If Type of Coverage equals 2 or 3, then the default value is

zero (0000).

Unused fields

Record Positions: 510 through 520

Data Length: 11

Data Type: Alphanumeric

Codes: Spaces